

ThermalKEM

An American NuKEM Company

January 9, 1990

ThermalKEM Inc.

454 S. Anderson Road, BTC 532

Rock Hill, SC 29730

803/329-9690

Mr. Dwayne Harrington
USEPA Region II
Woodbridge Avenue
Edison, NJ 08837

Dear Mr. Harrington:

As a service to you and as a statement of our appreciation of your business, allow us to review our existing procedures for scheduling shipments into ThermalKEM. Following these procedures will minimize receiving problems for you and help to insure prompt vehicle turn-around.

All shipments must be scheduled in advance. Typically, three to four weeks notice is required. To schedule shipments, please contact Customer Service at (803) 329-9690. The following information is needed for scheduling:

- * Company Name (Generator)
- * Shipping Address
- * Contact Name
- * Telephone Number
- * Purchase Order Number
- * Type of Transportation, i.e., Customer truck, Customer arranged transporter, or ThermalKEM to arrange.
- * Waste Stream ST Numbers
- * Number of containers and sizes per ST number
- * If lab packs are to be scheduled, the approved packing slips control number will be required.

Once your order has been approved and scheduled within our system, you will be given a SAN (Shippers Authorization Number). This number identifies the order as scheduled and approved for acceptance on the schedule date. You must write the five digit SAN on the South Carolina manifest under Section 15. Please advise ThermalKEM Customer Service of any changes to the original order prior to shipment as these changes must be approved and added to your SAN by Customer Service. Shipments arriving at ThermalKEM without a SAN must be rejected and returned to you at your cost.

We need your help and attention to this matter as Compliance Regulations do not permit ThermalKEM to accept any unscheduled or unapproved waste streams. We thank you for scheduling orders with accuracy and completeness. Your questions are always welcome.

Sincerely,


M.T. "Mackie" Humphreys
Customer Service Supervisor

MTH/sja

268866



DEPARTMENT OF ENVIRONMENTAL PROTECTION
SOLID WASTE ADMINISTRATION

A

SPECIAL WASTE MANIFEST

A 45888

SECTION I TO BE COMPLETED BY THE SPECIAL WASTE GENERATOR

Plant Identification Number 007117 Pick-Up Date 11/11/79
Company Name SYNKOTE PAINT COMPANY MO. DAY YR.
Pick-Up Address 144 VAN RIPER AVE. ELWOOD PARK, NJ 07401
Name of Hauler SYNKOTE PAINT COMPANY Address SAME
Name of Facility Scientific Chemical Processing Address 411 Wilson Ave. Newark, NJ
Emergency Spill Phone Nos.: 609-292-5560 or 609-292-7172

Handling Instructions:

Waste Type	Number of Containers	Physical State	Hazard ID.	Total Quantity Identify units in pounds or gallons use P for pounds and G for gallons	Pounds or Gallons	SECTION V TO BE COMPLETED BY THE SPECIAL WASTE FACILITY OPERATOR	
						Rejected Amount	
1. Acid Solution							
2. Alkaline Solution							
3. Arsenic Residues							
4. Catalyst Residues							
5. Cyanide Residues							
6. Chlorinated (Dioxin, Furan) Residues							
7. Etching, Pickling, & Plating Residue							
8. Explosive Residue							
9. Filter Clays, Filter Aids							
10. Ester, Alcohol, Ether, Ketone, Glycol Residues							
11. Heavy Metal Residue							
12. Organic and Heavy Metal Residue Mixture							
13. Latex Residue							
14. Peroxide							
15. Oil and Oil Sludges, Emulsions							
16. Paint and Pigment Residues							
17. Pesticides							
18. Pharmaceutical Wastes (Drugs, etc.)							
19. Lacramators, Amines, Mercaptans, Amide							
20. Plasticizer, Resin, Monomer, Elastomer Residues							
21. PCB, PBB Contaminated Materials							
22. Solvent, Halogenated Organic							
23. Solvent, Mixed							
24. Still Bottoms							
25. Radioactive Residue							
26. Tetraethyl Lead Residues							
Other (See Instructions)							
27.							
28.							
29.							
30.							

I certify that the above information is correct to the best of my knowledge.
Date 11/11/79 Signature and Title James Burrows Office Mgr.

SECTION II TO BE COMPLETED BY THE SPECIAL WASTE HAULER

I certify that the described quantity of material (s) listed in Section I was collected by me. State Number
Date 11/11/79 Signature James Burrows Vehicle License Plate Number NJ X11K 131M

SECTION III TO BE COMPLETED BY THE SPECIAL WASTE HAULER

Name of Hauler SYNKOTE PAINT COMPANY Address 144 Van Riper Ave Elwood Park, NJ
I certify that the described quantity of material (s) listed in Section I was hauled by me to the Special Waste Facility named in Section I.
Date 11/11/79 Signature James Burrows Vehicle License Plate Number NJ X11K 131M

SECTION IV TO BE COMPLETED BY THE SPECIAL WASTE FACILITY

Name of Facility SCP Address 411 Wilson Ave Newark, NJ
Registration Number 1671414 Date Waste Received 11/11/79 Accepted ☒ Rejected ☐
I certify that the hauler stated above delivered the waste described in Section I to this Facility.

Date 1-11-10 Signature and Title Mark B. [unclear]